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CONFIRMATION NO. 6180

SERIAL NUMBER 08/947,668	FILING DATE 10/09/1997  RULE 1.60	CLASS 623	GROUP ART UNIT 3738	ATTORNEY DOCKET NO. 534128-002-C
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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*  
 This application is a CON of 08/516,557 08/18/1995 PAT 5,702,489  
*OK - OK*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*OK - NONE*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 02/12/1998

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after <i>Allowance</i> Examiner's Signature Initials	STATE OR COUNTRY OH	SHEETS DRAWING 1	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 5
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TITLE  
 VALVE ASSEMBLY FOR A PROSTHETIC LIMB

FILING FEE  RECEIVED 1002	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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